SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

FOR LINE NUMBER: PAGE 2066 OF 2949 Use separate schedule(for each category of the Detailed Summary Page

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Full Name (Last, First, Middle Initial) MR. D. RAMSAY SIMMONS JR. Mailing Address P.O. BOX 760		Date of Receipt
City	State Zip Code	03 24 2014
BAINBRIDGE	State Zip Code GA 39818-0760	Transaction ID: 2014M04L11AI05884 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	201.00
Name of Employer	Occupation	
SELF-EMPLOYED	INVESTMENTS	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 401.00	
Full Name (Last, First, Middle Initial) DR. JOHN F. SIMMONS		Date of Receipt
Mailing Address 212 S. LIVE OAK STREET		M = M / D = D / Y = Y = Y
City	State Zip Code	03 05 2014 Transportion ID : 2014M04L114 N05995
GENEVA	AL 36340-2318	Transaction ID: 2014M04L11AI05885 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	500.00
Name of Employer SELF-EMPLOYED	Occupation MEDICAL DOCTOR	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial)		
DR. JOHN F. SIMMONS	Date of Receipt	
Mailing Address 212 S. LIVE OAK STREET		03 19 7 2014
City GENEVA	State Zip Code AL 36340-2318	Transaction ID: 2014M04L11AI05886 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	500.00
Name of Employer	Occupation	
SELF-EMPLOYED	MEDICAL DOCTOR	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	1000.00	